



Tobacco Cessation Among Missouri Adults

The Data — & — The Evidence

Cessation attempts by Missouri adult smokers, the data say...

- 49.5% of Missouri adults who smoked stopped smoking for one day, or longer, because they were trying to quit.
- 61.6% of current smokers were seriously considering stopping smoking within six months, but only 26.1% were planning to stop in the next 30 days.
- 48.3% of smokers thought it would be very, or somewhat, likely that they would succeed in quitting.

Health Professional counseling, the data say...

- 63.7% of Missouri adult current smokers were advised by a health care professional to quit in the past 12 months.
- 35.5% of current smokers had a health professional recommend nicotine replacement drugs in the past 12 months.
- 14.7% of current smokers had a health professional recommend a cessation class, counseling or quit line.
- 5.4% of current smokers had a dentist advise them to quit smoking in the past 12 months.

The evidence says...

- Approximately 75% to 80% of smokers who quit relapse within six months.¹
- A substantial number of smokers who quit go through cycles of quitting and relapse.²
- Each year in the United States about 3% to 5% of smokers quit for a year or longer, or even for good.³

The evidence says...

- Health care providers delivering advice to patients to quit smoking increased quitting by 13% in 2 to 24 months after programs began.⁴
- Substantial evidence exists that even brief counseling by a physician or other health care provider can be effective in helping smokers quit.⁵
- Although the average time that primary care physicians see a patient is 12-16 minutes, implementing the **5 A's of intervention** can take 3 minutes or less of the clinician's time (Asking patients if they smoke, Advising patients who smoke to quit, Assessing willingness to make a quit attempt, Assisting with making a quit attempt, and Arranging for follow-up contact to prevent relapse).⁶

Cessation assistance for Missouri adult smokers, the data say....

- 14.3% of current smokers used the nicotine patch, nicotine gum or other medication to help them stop smoking the last time they quit
- 2.8% of current smokers used a class or counseling to help them quit the last time they tried
- 1.9% of former smokers used the nicotine patch, gum or other medication to help them stop smoking when they quit
- 0.2% of former smokers used a class or counseling when they quit
- 59.3% of current smokers were aware of assistance to help them quit
- 21.3% of current smokers had employers offer assistance for quitting, such as a stop smoking program

References:

¹ Carmody TP. Preventing relapse in the treatment of nicotine addiction: current issues and future directions. 1992. In Reducing Tobacco Use: A Report of the Surgeon General. US Department of Health and Human Services. 2000.

² Cohen S., et.al. Debunking myths about self-quitting: evidence from 10 prospective studies of persons who attempt to quit smoking by themselves. 1989a. In Reducing Tobacco Use: A Report of the Surgeon General. 2000.

³ Reducing Tobacco Use: A Report of the Surgeon General. 2000

⁴ Ibid

⁵ Fiore, M. et.al. Treating Tobacco Use and Dependence: Clinical Practice Guidelines. US Department of Health and Human Services. 2000.

⁶ Ibid

⁷ Zhu, S. et.al. Smoking cessation with and without assistance: a population-based analysis. 2000. In Reducing Tobacco Use: A Report of the Surgeon General. 2000.

⁸ Hopkins, D. et.al. The Guide to Community Preventive Services: Tobacco Use Prevention and Control. American Journal of Preventive Medicine. February 2001.

The evidence says...

- The success rate among those that attempt to quit without assistance is half of that for those that use some form of assistance⁷
- There was a 41% improvement in quit rates among smokers that used telephone counseling compared to those that did not use the service⁸

Recommendations to increase quitting among Missouri adult smokers:

- Missourians who smoke need encouragement and support to successfully quit. Health professionals, including dentists, should implement the 5 A's counseling intervention and recommend effective cessation aids such as nicotine replacement therapies and medications.
- The Guide to Community Preventive Services⁸ recommends the following additional evidence-based strategies to increasing quitting:
 - » Systems to remind providers to assess patients for tobacco use and counsel them to quit;
 - » Reducing patient out-of-pocket costs for effective treatments for tobacco dependence;
 - » Increasing the unit price for tobacco products;
 - » Mass media campaigns to promote quitting when combined with other interventions; and,
 - » A telephone counseling quitline to help those who smoke to quit.

Data Source: Missouri County-level Study (2003); Missouri Department of Health and Senior Services, Section of Chronic Disease Prevention and Health Promotion; random telephone survey of 15,000 Missouri adults, age 18 and older.